# Gold Club Membership Application

Make your best choice for service, response, reliability, protection, care and safety. These plans offer the ***BEST*** and most ***AFFORDABLE*** options to avoid costly repair, replacement, loss of comfort, or loss of safety. We maintain accurate records of service & repair for better equipment management and warranty protection. Most major brands require annual maintenance performed by a licensed contractor in order to maintain manufacturer's warranty. Study results indicate that routine maintenance can save up to 20-30% on heating & cooling bills. Minor repairs and adjustments can prevent major repairs and catastrophic failures that could require premature equipment replacements.

**As a gold club member, you will receive an expert technician who will perform:**

**Two Scheduled Maintenance visits per year · 10% discount on System Replacement**
**10% discount on Filters · 20% discount on Repairs · Reduced diagnostic charge**
**Priority Service · No overtime fees · Reminder Calls to schedule maintenance**

| GOOD VALUE | BETTER VALUE | BEST VALUE |
|---|---|---|
| 1 year Preventive Maintenance | 2 year Preventive Maintenance | 3 year Preventive Maintenance |
| Tune-ups per system: 2 | Tune-ups per system: 4 | Tune-ups per system: 6 |
| $179 for 1 system | $300 for 1 system | $380 for 1 system |
| $169 each additional | $250 each additional | $365 each additional |
| Or $15.00 monthly | Or $12.50 monthly | Or $10.55 monthly per month~ |
| $14.00 each additional | $10.50 each additional | $10.15 each additional |
| | *Savings 2 years vs 1 year* | *Savings 3 years vs 1 year* |
| | *$121 for one system* | *$157 for one system* |
| | *$81 each additional* | *$142 each additional* |

Name (cardholder) _____

Address _____

City_____ TX, Zip Code _____

Phone_____ Email address:_____

Monthly Investment $_____ Gold

I understand that the monthly fee will continue until a written notice of termination is received at Custom Comfort. Allow 2 weeks for processing.

Client Signature_____ Date_____

Representative_____Date_____

☐ Please automatically bill my credit card:

☐ M/C ☐ Visa ☐ Discover ☐ AmEx *Exp.Date*_____

Account # ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Or

Paid in Full

Check #_____

Amount_____

TACLB27392E
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